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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver,
 3. Information provided must be as truthful and accurate as possible. Any withit misrepresentation or witholding of material facts may allow insurance companies to
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation,
- This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.

By the lodgement of this report to the insurers, yeaforesaid.	ou hereby consent to the archiving of this report at the centre and to copies of the report being made available
经营业的企业的企业的企业	ACCIDENT STATEMENT
Date Of Report	26/03/2018 12:36
Date Of Accident	19/03/2018 14:30
Exact Location Of Accident	FUSIONPOLIS CARPARK
Country/State of Loss	SINGAPORE
建设工作的	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SDX7000E
Insured/Policyholder	
Name Of Registered Owner	YAP HIM KUEI WARREN
NRIC No	S7135179C
Email Address	WARRENY@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-96360612
Alternative Phone No	OTHERS-96360612
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ

Model E250

Exact Purpose for which vehicle was being used at PRIVATE USE

time of accident

Are you claiming under your own insurance policy for repair to your vehicle?

If No, Please state action to be taken

Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 2100273496-06

Cover Note Number

Driver

Name of Driver YAP HIM KUEI WARREN

NRIC No. S7135179C Date Of Birth 03/10/1971 Occupation INDOOR Date Of Driving Pass 29/08/1991

Driving Experience 26 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96360612

Fax Number

Contact Number OTHERS-96360612

EMail Address WARRENY@SINGNET.COM.SG Address

BLK 81B LORONG 4 TOA PAYOH

#04-418

Postcode

312081

Was driver an employee of the Insured's Company NO

If No. Relationship of the Driver with the Insured

OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

0

Details of Police Action

Was the accident reported to the police?

NO

If Yes Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

GBC150K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(Including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time: 26318

1225 Mrs

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NEIC/EIN No

carporte of fueron polis SKETCH PLAN BOUDTYDE Parked @ 12.39 pm. Divider. GBC150K 10789. DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Enter Fusionpolic carpoints @ 12-39 pm & parried my car IN a lot. There was a divider separating the car pourle lots from the other siell. When I returned to my car @ about 2.40 pm. Saw the pick up, GRC 150K rear against my car rear. My near bumper was dented. There has no down in the rehicle GRC 150K I went to the Funsin pools senity counter or
Sow the pick up GRC 150k year against my car vear. My near burner was dented. There was no driver in the while GRC 150k.
Saw the pick up, GRC 150k year against my car vear. My near bumper was dented. There was no driver in the white GRC 150k
Some the price up, GRC 150k year against my con year. My near bumper was dented. There was no driver in the while GRC 150k
There was no driver in the white GROUTH
There was no driver in the valurdo GRELIERT
I went to the Funson polis senith counter or
TO THE PROPERTY OF THE PROPERT
can park attendant to report the incident
Took pricture of the incident as the other
diver was not in his vehicle.
Mon very very ce.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time: 26/3/18 12.52 by - Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Add World

ACCIDENT'STATEMENT
ACCIDENT DATE: 19, 03, 2018 (DO/MM/YYYY), TIME: (, 2, 30) (HH:MM)
LOCATION Fusiorpolis carpart.
A STATE OF THE STA
1. DETAILS OF VEHICLE SDX TODGE
BINSURANCE COMPANYI. A16.
OPOLICY NUMBER! 2100 1 ST TO PARTY / THIRD PARTY FIRE LIHEFT
O)MAKE & MODEL! BENZ E 250, () TYPE: (SALOON / COUPE / MPY / VAH / LORRY / MOTORCYCLE / OTHERS)
SIVEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
LIGHT OF LICINIC AT ALL HOLD HOLD IN
IF INO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)
2. INSURED / POLICY HOLDER bue warmen MALE / FEMALE 12
ANAMEL 19 CHIRSTING CONTACT 968600 TO
CIADORESSI BY B TOA PAYOH LORY # 04-418 5312081
CONTINUE TO 3. d IF DRIVER ALSO POLICY HOLDER
WALE / FEMALE)
(Including driver) by NRIC/FIN/PASSPORT: CONTACT:
(1) c)ADDRESSI
TO DATE OF BIRTHI (03 10 1971 (DD/MM/YYYY)
LACCEL PATION (INDOOR / CATO 32/ OK 17)
INDITE OF DRIVING PINES - TO MODELY? (YES INV)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSUREDT
WILL THOUGHT INJURED INTUITY
7. O) REPORTED TO FOLIA WALL POLICE STATION
TUIDO PARTY VEHICLE COLLEGE INCOME INCOME
4 140 of personger of VEHICLE NUMBER! GBC 1501 MODEL 15 At the car-
DI DRIVER'S NAME: MONTA CONTACT
E STATE OF THE STA
THE PRINCIP NUMBER
WILL A SECRETARY OF DOIVER'S NAMEL CONTACT!
(Including driver) 1) HRIO/FIN/PASSPORTI
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email: warrenga singuet.com. 59
email = warrenger sig.
Pax = 68780986
TO 12 (2) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
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10 At

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7135179C



No.

YAP HIM KUEI WARREN



GHINESE
Date of Beth
03-10-1971
County of Seth
SINGAPORE











CERTIFICATE OF INSURANCE

Name of Policyholder

: Yap Him Kuel Warren

Period of Insurance

: 26 Sep 2017 To 25 Sep 2018

Engine No.

: 27186030241682

Chassis No. : WDD2120472A443802

Vehicle No. Policy No.

: SDX7000E : 2100273496-06

Endorsement No.

Issued Date

: 18 Aug 2017

ABOUT THE COVER

Make/Model

: MERCEDES E250 CGI BE

Engine Capacity/Tonnage : 1,796.00 CC

Sum Insured : Market Value

First Year of Registration : 2011

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

In) The Pulicyholder

a) The Pullsymoder b) Any other sensor, and is criving on the Poocuhorder's order or with the ther permission This Policy will interned the Policyholder or any validanced driver only if he she meets the specified against and

You have to pay to another sum of 33 000 as "visus initial mexiconics Drug Excess" (YOR of You are or Your Authorise Drug Institute or University and I and or had less

Age Condition

: All Age Condition

Limitation as to use:

Use any for small, durregic and pleasure purposes and fir the Priconder's business. This Policy does not cover use for him or reward, making pulsars, making having its making having an appendition of the contestion with Motor Trace.

Loss of Use 1500cc - 1600cc Optional

* Limitations rendered improvement by Section 8 of the Mosco Nebular, Throughout Roads and Companyalon, Ad. Com. 130, and Section 35 of the Road Transport Adv. 1827 (Italiana), are not to be middled and or higher headings.

EXCESS

Fire - S0 Own Damage - \$800 Trieft - \$0 Plood Cover - \$0

Section 2

risperty Damage - 93

Windacreen 3100

Named Driver and Excess

Yap Him Kue Vorten + Still Our Caronas

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Approved Reporting Centres: ALE Aumortant Repairers (For claims related repairer)

Any account regains to the Vehicle must be comed out by one of our Authorised Reparting Within the first 2 years of the first registration of the Vehicle in Segapors. You have the option of having the accorded regains carried out at the Sole Agiest's workshop.

For other Approvis Reporting Control AG Authorises Reparting, please contact our 24 hour accident emergency hotion at +65 ±336 6200. Alternatively. You may refer to AUS sweetile work any norming or AIG 50 Notice App. Sempty asserts and download. AG 50 Note (Tunes or Google Plan)

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

We needly certify that the palicy to which the Certificate of Visuational relates in issuant in accordance with the provisions of the Many Vehicles (Third Party Roses and Companyation Act (Cap. 1909) (Malayara) and Motor Vehicles (Third Party Roses) Rules 1909 (Malayara)

0693319000

VAP HIM KUEL WARREN

371 ALEXANDRA ROAD #06-28 AIA ALEXANDRA

SINGAPORE IS9963 SP-WARREN

Underwritten by AiG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE